Doc # 2004153474

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Date: 06/24/2004 03:04P

Filed by: DEPT OF SOCIAL & HEALTH SVCS

Filed & Recorded in Official Records
of SKAMANIA COUNTY

J. MICHAEL GARVISON

AUDITOR

Fee: \$0.00

DIVISION OF CHILD SUPPORT

PO BOX 11520 TACOMA WA 98411-5520



STATE OF WASHINGTON DEPARTMENT OF SOCIAL AND HEALTH SERVICES DIVISION OF CHILD SUPPORT (DCS)

NOTICE AND STATEMENT OF LIEN

Grantor or Debtor: <u>Taylor A. Bl</u> doing business as:	ack also known as or
doing business as.	
SSN	, DOB <u>04/24/60</u>
Grantee or Creditor: The Department	nt of Social and Health Services (DSHS).
Legal Description:	
Assessor's Property Tax Parcel Accou	int Number:
DSHS claims that the debtor named Support (DCS) files a lien in the amo	above owes past-due child support. The Division of Child ount of \$ 14,703.82 in Skamania County on:
All real and personal property of	the debtor named above except Tribal Trust property.
Only the property described in t	he Legal Description section above.
June 22, 2004	D. Orr
Date	Authorized Representative DIVISION OF CHILD SUPPORT
(360) 696-6100	D. Orr
Telephone Number	Person to Contact
In reply, refer to: Case #: 1259106	1098030

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 04/1997) (FG REL:06/1999) (3334:040622:031327) 1259106/3334